

YOUTH CORPS **APPLICATION**

(Deadline April 30th)

RETURN SIGNED APPLICATION TO: Attention: YOUTH CORPS 8625 E MOUNTAIN VIEW RD. SCOTTSDALE, AZ 85258 (480)312-8376/FAX# (480)312-8378 E-mail YouthCorps@ScottsdaleAZ.gov

Name:			_Age:Birth Date:	
School:			Grade (in fall):	
Parent E-mail: Home Phone:Cell:			Work:	
Address: Volunteer E-mail:				
-	•	•		
` •		,		
What kind of v	olunteer work	do you prefer	?	
Youth ProgramsWork w/Seniors			Service ProjectsOffice	5
_			ner 2010 (see options below):	
-	-			
2)			selection criteria, and the volunteer availability.	
Are there any h	naalth prablam	us was pood to h	e aware of:	
•	-			
		iy need special a	accommodations:	
Summ <u>er Avail</u>		1		\neg
	Start Time	Stop Time	Time-Off Needed	
Monday				
Tuesday				
Wednesc	lay			
Thursday	7			
Friday				
2			1-3 days a week for an average of 15-20 hours a week. Scl	nedules are
0 2010		ram needs, meeting sele	ction criteria, and the volunteer availability.*	
Summer 2010 S				_
		hool (1st - 5th)		_
TREC: Desert Canyon Elementary School (1st – 5th)				_
TREC: Horizon Community Center (1st – 5th) TREC: Paiute Neighborhood Center (1st – 5th)			Office: General	_
			Office: Human Resources	_
	ohave Middle Schoo		Office: Traffic Engineering	_
	pper Ridge Element		Office: Recreation Main Office	_
REC: K-Kids (4-5 Year Olds) Desert Canyon			Fire Department Police Horse Barn	_
REC: K-Kids (4-5 Year Olds) Mohave				_
678 REC: Desert Canyon (6 th – 8 th) 678 REC: Mountain View (6 th – 8 th)			McDowell Mountain Ranch Park	_
			Special Events/Eldorado Park Club SAR	_
Service Pr	oject Team: World (* Sites may be added o	th Corps office with requests other than listed.*		
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Notice of Parental/Guardian Approval

By signing below I acknowledge that I have read the information regarding the City of Scottsdale Youth Corps Volunteer Programs and have had any questions that I may have answered. The applicant on this form has my permission to participate in the application process for this program.

Parent Signature:	Data
rarent Signature.	Date: